	31	OFFI	TIME
₩.	Η.	D.	

lease type a plus sign (+) incide this	$box \rightarrow \boxed{+}$			PTO/SB/01 (12-97)			
Under the Paperwork Reduction a valid OMB control number.	on Act of 1995, no perso	Patent and Trade ons are required to resp	Approved for use to mark Office; U.S. cond to a collection	through 9/30/00, OMB 0651-0032 DEPARTMENT OF COMMERCE to of Information unless it contains			
DECLARATION FO		Attorney Doo	ket Number	SI-30983(1)			
DECLARATION FO		First Named	Inventor	Schmitz, Brian			
PATENT APPL			COMPLETE IF KNOWN				
(37 CFR ⁻	1.63)	Application N	umber				
☑ Declaration ☐ □		Filing Date					
Submitted OR S	eclaration ubmitted after Initi	al Group Art Uni	t				
Filing (3	iling (surcharge 37 CFR 1.16 (e)) equired)	Examiner Nar	ne				
America, listed below and have at	and sole inventor (if only subject matter which is on the sole inventor (if only subject matter which is on the sole information which is one informational applications of the sole of the sole informational applications of the sole of the sole informational applications of the sole of the sole informational applications in the sole of the s	one name is listed bel claimed and for which a cof the Invention) as United as amended on (MM/DI contents of the above id the invention) 118(a)-(d) or 356(b) on which designated at	ow) or an ofiginal, patent is sought of patent is sought of patent is sought of patent in a patent in	cation Number or PCT International (if applicable). on, including the cleims, as EFR 1.56.			
or of any PCT international application Prior Foreign Application Number(s)	Country	Foreign Filing Dat	1	Certified Copy Attached?			
T Additional Control							
Additional foreign application n I hereby claim the benefit under	umbers are listed on a : 35 U.S.C. 119(a) of any	supplemental priority da United States provision	la sheet PTO/SB/	02B attached hereto:			
Appression Number(s)	Filing Date	(MM/DD/YYYY)		(W			
60/258,703	12/28/2000		numb suppl	ional provisional application ers are listed on a emental priority data sheet SB/02B attached hereto.			

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will very depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

X

	PTO/SB/01 (12-97)
Please type a plus sign (+) inside this box -> [+]	Approved for use through 9/30/00. OMB 0651-0032
	Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Underthe Paperwork Reduction Act of 1895, no persons	are required to respond to a collection of information unless it contains

a valid OMB control number.

DECLA	RATION		Utilit	у ог [)esign	Pater	nt Ap	plicati	on
I herebyclaim the bene United States of Ameri United States or PCT In information which is ma and the national or PCT	ica, ilsted below an itemational applica aterial to patentabili	d, insofa ion in the Iv as def	r as the su manner pr Ined in 37 (bject matter ovided by It CFR 1.56 w	of each of the	e claims of this	s applicatio	n is not disclose	ed in the prior
Ų.Ş. Par	ent Application Number		T Paren	ŧ		iling Date D/YYYY)	Pa	arent Patent (if applica	

	PCT international a								
As a named inventor, I i and Trademark Office o	nereby appoint the f					this application	and to tran:		
one reaching office o	omicoteo dierevya	X Cu		nber 022	202			Place Cu Number 8	
		Table All		ctitioner(s)	name/registrat	tion number lis	red below	Label	3
Nam	e			tration mber		Nam	e		gistration tumber
Additional registere	d practitioner(s) nan	ned on st	upplementa	Registerer	Pertitioner	oformation she	at PTO/SP/	NSC attached he	rntn
Direct all correspond	ence to: X Cu	stomer	Number le Label	02220		OR		spondence ac	
Name									
Address									
Address									
City					State		ZIP		***************************************
Country			Telepho	ne			Fax		
I nereby declare that a believed to be true; an punishable by fine or a spollcation or any paten	o minier mar mese monsonment, or ho						ents made o		
Name of Sole or I	irst Inventor;				☐ A petiti	on has been	filed for thi	s unsigned in	/entor
Given Nan	ne (first and middle	[if any]	I)			Famil	v Name or	Surname	····
Brian					Schmitz		,		
Inventor's Signature	Brian	5ch	. Ne					anav	
Residence: City	New Holste			wi	Country	USA		9.000	"
Post Office Address	New Holstein State WI Country USA Chitzenship US 2331 Monroe St.						103		
Post Office Address		<u>.v ur</u>							
City	New Holstein S	tate W	T T	ZIP	53061	 ,	Country	USA	***************************************
Protest	rs are being nam		1			Invertor(s) si	<u> </u>		

[Page 2 of 2]

Mailing Address 1498 Ponderosa Ave.

Name of Additional Joint Inventor, if any:

Given Name (first and middle [if any])

Mailing Address

chy Green Bay

inventor's Signature

Residence: City

Mailing Address

Mailing Address

Under the Paperwork Reduction Act of 1995, no persons are req	uired to respo	U.S. Palent and Tradem	ark Office: U.	ough 10/31/2002. OMB 0651-003 S. DEPARTMENT OF COMMERC CONTROL & VAIID OMB CONTROL BURDEN	
DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1			
Name of Additional Joint Inventor, if any:		A petition has bee	en filed for th	is unsigned inventor	
Given Name (first and middle [if any])		Family	Name or St	urname .	
Jeff E.		Morley			
Inventor's Signature M. C.	? ?			Date 9-26-01	
Residence: City Kijel St	ate WI	Country USA		Citizenship US	
Mailing Address 17012 Lax Chapel Rd					
Mailing Address					
City Kiel s	tate WI	ZIP 53042	Countr	y USA	
Name of Additional Joint Inventor, if any:		A petition has been	n filed for this	s unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname			
Mark P.		Petrouske			
Inventor's Mar I Pro-)			Date 9/26/01	
Residence: City Green Bay	state WI	Country USA		Cifizenship US	

Country Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

State WI

State

State

ZIP 54313

Country

Country USA

Date

Citizenship

Family Name or Surname

A petition has been filed for this unsigned inventor